





**Anticipated Outcomes/Benefits:**

(Attach additional pages if required)

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**ATTACH QUOTES AND CORRESPONDING BANK DETAILS FOR DIRECT PAYMENT**

Project Cost: Inc. GST

<b>Labour:</b>		\$
<b>Materials:</b>		\$
<b>Equipment:</b>		\$
	Total of Project Costs	\$
<b>Grants:</b> Applied or Applying for:	\$	
<b>Your Contributions:</b>	Hours (or)	\$
<b>Volunteer Contributions:</b>	Hours (or)	\$
	Total	\$
<b>Project Cost:</b>		\$
Tilt Renewables & Salt Creek Lend a Hand Foundation Grant Payment Committee Use		\$
I certify that the information concerning this application is true and correct.		

Signed: \_\_\_\_\_

Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

For office use	Cheque No.
Cheque made out to	\$
Cheques made out to	\$

Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Committee Member: \_\_\_\_\_

Please retain a copy for your records and email or send the original application form to:

**Tilt Renewables – Salt Creek Lend A Hand Foundation**

**ADDRESS: C/- 1619 Woodcutters Lane, WOORNDOO 3272 | Telephone: 1800 122 823 |**

**EMAIL: SCWFcommunityfund@tiltrenewables.com**